# The Missouri Substance Awareness Traffic Offender Program (SATOP) Policy and Procedure Manual

Effective 09/01/2023

Division of Behavioral Health, Department of Mental Health

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#### 1 BACKGROUND AND PURPOSE

The Substance Awareness Traffic Offender Program (SATOP) Policy and Procedure Manual replaces all prior program specific policy and guidance documents. It does not replace what is required in certification standards or by contract. This manual provides an overview of the program, including the policies and responsibilities of contracted providers.

The SATOP program is administered by the Department of Mental Health, Division of Behavioral Health (DBH).

The SATOP Code of State Regulations (CSRs) and SATOP Statutes may be updated periodically and amended as needed. Changes in the SATOP CSRs and SATOP Statutes will be reflected in the SATOP Policy and Procedure Manual. The SATOP Policy and Procedure Manual may also be updated periodically and amended as needed.

#### 2 SATOP OPERATIONS

The Department of Mental Health (DMH), Division of Behavioral Health (DBH), certifies and contracts with agencies to provide program services to individuals whom have had a substance-related traffic offense. SATOP is designed to provide individualized education and outcomes driven treatment and recovery services commensurate with an assessed level of an individual's level of risk and need, which includes an assessment, blood alcohol content (BAC) at time of arrest, driving record, treatment history, and prior arrest history. Completion of a SATOP is a prerequisite for driver's license reinstatement for individuals whom:

- Have pleaded guilty or have been found guilty of an alcohol or drug impaired driving offense;
- Have been referred as a result of an administrative suspension or revocation of their driver's license, court order, condition of probation, or plea bargain; or
- Have been charged with minor in possession and zero tolerance offenses.

SATOPs shall provide or arrange for screening, clinical assessment when indicated, education, and treatment services for individuals referred to the program.

All SATOPs shall comply with this edition of the SATOP Provider Manual, Department of Mental Health, 1706 E. Elm Street, PO Box 687, Jefferson City, Missouri 65102 and incorporated herein by reference. The referenced manual does not include any later amendments or additions.

The mission of SATOP is to:

- Inform and educate individuals about the dangers and consequences of alcohol and drug impaired driving;
- Educate youth about the risks and consequences of alcohol and other drug use and help them develop skills to make healthy choices;
- Motivate individuals for personal change and growth; and
- Contribute to the public health and safety of Missouri by preventing and reducing the prevalence of alcohol and drug impaired driving.

#### 2.1 SATOP CODE OF STATE REGULATIONS

The SATOP CSR can be found in Division 30 - Chapter 3: Substance Use Disorder Prevention and Treatment Programs, beginning on page 38, (9 CSR 30-3.201)

This rule identifies the Department of Mental Health as being responsible for the certification of Substance Awareness Traffic Offender Programs (SATOP) as mandated by state statute. The rule includes program purpose and mission, functions, certification requirements, and types of SATOPs certified by the department.

#### 2.2 SATOP STATUTES

Specific statute related to revocation, reinstatement, and the requirement for SATOP can be found on our website at: <a href="https://dmh.mo.gov/alcohol-drug/satop/missouri-statutes">https://dmh.mo.gov/alcohol-drug/satop/missouri-statutes</a>

#### 2.3 SATOP Performance Indicators

The following are intended as examples of indicators that can be used by the department and the SATOP to demonstrate achievement of the program's purpose, mission, and functions. Indicators can include, but are not limited to:

- Characteristics of persons participating in SATOP such as demographics, blood alcohol
  content (BAC) at the time of arrest, prior drinking and driving arrests, prior participation in
  a SATOP, and prior treatment for a substance use disorder;
- Consistent use of screening criteria including the rate at which persons are assigned to the various types of education and treatment programs;
- Rate at which persons successfully complete a SATOP and the various types of programs available;
- Reductions in alcohol- and drug-impaired driving among those who complete a SATOP;
   and;
- Program satisfaction and feedback from individuals served.

#### 3 SATOP Provider Requirements

SATOP providers are required to meet certification standards. The use of telehealth services following the guidelines established by contract are acceptable. The Department must approve program location(s) prior to the delivery of services. Agencies must submit a CIMOR Organization Information Change Form to update the organization's data to reflect new services and sites. The change form can be obtained on the internet at: <a href="https://example.com/horses/beauto-standards-new-com/horses/baseloss-standards-n

Each agency shall make the following inquiries for all new staff, volunteers, students, and members of the provider's household, where applicable. <u>9 CSR 10-5.190 (4)(A)</u>

A. An inquiry with the Department of Health and Senior Services to determine whether the person having contact with individuals is listed on the employee disqualification list of the Department of Social Services or the Department of Health and Senior Services.

- B. An inquiry with the DMH to determine whether the person is on the DMH disqualification registry;
- C. A criminal background check with the Missouri State Highway Patrol shall be initiated within two (2) working days of hire for staff who will have contact with individuals served.
- Staff who conduct education and assessments must:
  - A. Not have had a suspension or revocation of their drivers' license within the preceding two years;
  - B. Not have received a citation or have been charged with any state or municipal alcohol or drug related offense within the preceding two (2) years, except when found not guilty in a court of competent jurisdiction.
  - C. Must meet credentialing requirements of the Missouri Credentialing Board
- The agency shall ensure that staff possess the training, experience and credentials to effectively perform their assigned duties
- Qualifications and credentials of staff shall be verified prior to employment, with primary source verification completed within (90) days
- All staff who provide SATOP services or are responsible for the supervision of persons served shall participate in at least 36 clock hours of relevant training during a two (2)-year period. (9 CSR 10-7.110)

#### 4 SATOP Screening

New or existing employees who need access to CIMOR in order to enter screening information must complete the DMH Contract Provider Access Request Form to obtain a user ID and password. This form may be downloaded at: https://portal.dmh.mo.gov/

If an employee with access is no longer employed with your agency, the agency's Local Security Officer must submit a DMH Contract Provider Access Request Form asking that the individual's access be removed. An employee can have access for more than one agency, but must complete another Contract <a href="Provider Access Request Form">Provider Access Request Form</a> requesting permission to use their User ID at that agency.

#### 4.1 SCREENING PROCESS

Offender Management Units (OMU) are the designated entry point for individuals referred to a Substance Awareness Traffic Offender Programs (SATOP).

- (A) All OMUs must be certified by the DBH to provide the Offender Education Program. Treatment programs that are contracted by a DWI court to serve serious and repeat offenders are excluded from this requirement.
- (B) All individuals are screened at the OMU by a SATOP Qualified Professional (SQP). The credentialing requirement for the SQP designation can be found at: <a href="Credentials Missouri Credentialing Board (missouricb.com">Credentialing Board (missouricb.com</a>) The SQP assigns the individual to an education or treatment program based on screening results, department referral criteria, and their

professional judgment. Screening recommendations are impartial and based solely on the needs of the individual and the welfare of society. OMUs must have written policies and procedures for conducting individualized screenings and issuing program recommendations based on screening results.

- (C) Upon the conclusion of the screening, the agency enters the SATOP recommendation into CIMOR. The cost of the assessment screening is \$126, in addition to a \$249 state-mandated supplemental fee. A screening recommendation in writing is issued via a SATOP Assignment form to each individual at the completion of the screening. Based on the screening assignment:
  - 1. Each individual is informed of their right to a second opinion from an alternative OMU and right to judicial review if he/she objects to the recommendation of the originating OMU. The notice must be in written format and signed by the individual.

The following criteria applies to second opinions:

- a. The right to a second opinion is forfeited if the individual has enrolled in the originating OMU's recommended program;
- b. The alternative OMU must conduct a thorough review of the individual's original screening recommendation and obtain a copy of the SATOP Offender Assignment form from the originating OMU (release of information is not required);
- c. The alternative OMU must obtain a current driving record from the Department of Revenue or other reliable source;
- d. The individual must pay the screening fee for the second opinion but is not required to pay the supplemental fee; and
- e. The OMU issuing the second opinion is the official OMU of record. The OMU is responsible for issuing the screening recommendation to the individual, monitoring the individual's compliance with the recommendation, and notifying the originating OMU to close the individual's record in their program.
- 2. Individuals that do not agree with their screening assignment have the option to file a petition for review and determination in the circuit court of the county in which the recommendation was made pursuant to sections 302.304 and 302.540, RSMo. The motion must be filed using the printed form provided by the Office of State Courts Administrator, 2112 Industrial Drive, PO Box 104480, Jefferson City, MO 65110.
  - a. The SQP making the screening recommendation may be summoned to court to justify their recommendation. Depending on the county, the court may require a legal representative to be present on behalf of the screening agency. If this is not feasible to pay for a legal representative, a letter needs to be submitted to the court from the screening agency to explain an individual's program placement. Recommendations should always be justified on both the DRI-2 summary and Offender Assignment Form, and these comments should be clear and complete.
- (D) Individuals are not required to fulfill their SATOP requirement with the OMU that conducted their screening. Individuals may request to attend a program based on circumstances such as

distance, work schedule, or other factors. The originating OMU shall provide each individual with the contact information for certified SATOPs in ones chosen location in order to select a service provider.

- (E) The OMU provides a referring court or probation and parole office with a copy of the SATOP Offender Assignment form, upon request, and with proper release of information from the individual.
- (F) The screening process includes, but is not limited to:
  - 1. Collection of basic demographic information;
  - 2. Completion of the 2013 edition of the Driver Risk Inventory-2 (DRI-2) published by and available from Behavior Data Systems, PO Box 44256, Phoenix, AZ 85064-4256. The document incorporated by reference does not include any later amendments or additions;
  - 3. Administering adjunct screening questions (as required by DBH)
  - 4. A face-to-face interview with the SQP (in-person or via telehealth), including information related to any previous substance use treatment;
  - 5. Review of the individual's most recent Missouri driving record (less than 2 weeks old) from an approved or credible source;
  - 6. Obtain information on the Blood alcohol content (BAC) at time of arrest and/or toxicology results, if available
  - 7. Reference Attachment R Screening Referral Criteria (located in the agency's SATOP contract);
  - 8. Review of any prior Episode of Care (EOC) in CIMOR, if available;
  - 9. A written summary of findings and program assignment; and
  - 10. Completion of the SATOP Assignment Form and, when required, a narrative report to the court with release of information from the individual.

#### 4.1.1 Screening and Referral

- (A) Coordination with the courts, probation and parole, Department of Revenue, or other entities shall be provided, as necessary, to verify service recommendations are understood by all parties.
- (B) Individuals who have a mental health condition, which may interfere with his/her participation in SATOP shall be referred to a qualified mental health professional for an evaluation. Participation in SATOP may be delayed until the individual's mental health needs are evaluated and necessary services are obtained.
  - The OMU shall maintain an affiliation agreement or memorandum of understanding with a certified community mental health center or a licensed mental health professional in order to promptly coordinate mental health services.
- (C) Each individual who receives a recommendation for substance use disorder treatment shall be given a directory of certified treatment programs for the area in which one chooses to obtain services. A directory of certified treatment programs can be found at this link: <a href="https://dmh.mo.gov/media/pdf/directory-satop-providers">https://dmh.mo.gov/media/pdf/directory-satop-providers</a> A statement shall be signed by the individual acknowledging receipt of the directory as well as notice that he/she is not required to obtain recommended services from the same agency that conducted the screening. Additional

information on the OMU with specific program requirements can be found under Section 10: Program Specific Requirements.

(D) Certification standards require that screening recommendations must be impartial and solely based on the needs of the individual and the welfare of society. Agencies violating this provision can face probation and/or revocation of department certification. For example, Agency A operates an OEP and consistently refers offenders with three or four previous offenses to the OEP. Cooperation in this area by all OMUs is essential to assure the integrity of SATOP statewide. Failure to be objective in all cases may jeopardize the future of the OMU's contract.

#### 4.1.2 SCREENING TOOLS

The DRI-2 is a screening instrument specifically designed for use with DWI (Driving While Intoxicated) and DUI (Driving Under the Influence) offenders. DRI-2 tests can be administered online. The DRI-2 is available in English and Spanish and is at a sixth grade reading level.

The DRI-2 is a 113 item, self-administered DUI risk evaluation and assessment instrument. It is a brief, easy to administer, user-friendly, and comprehensive instrument. The Missouri DRI-2 may be administered directly on a computer or in test booklet format and takes about 20 to 25 minutes to complete. DRI-2 reports can be printed on-site within three minutes of test completion. The DRI-II contains six separate scales researched and standardized based on the DUI/DWI population. The six scales are:

- 1) Truthfulness
- 2) Alcohol
- 3) Drug
- 4) Driver Risk
- 5) Stress Coping Abilities
- 6) Substance Dependency/Abuse

In the event the DRI-2 screen results are invalid, the SQP must:

- Review the pre-test instructions; and
- Conduct a retest with the individual.

The Missouri DRI-2 is periodically reformulated with new questions. If at any time the system is seriously compromised, the test may be reformulated. In their agreement with Behavioral Data Systems, programs are prohibited from any unauthorized use of the DRI-2 and subject to termination of their contract is such use occurs.

Test booklets, training manuals, ongoing support services, and an annual summary report are available from Behavioral Data Systems. A Spanish version and a reading-impaired version are also available. For more information call 800-231-2401.

#### 4.1.3 ADJUNCT SATOP SCREENING QUESTIONS

The DBH requires that the following additional screening questions be administered as part of the screening and assignment process:

1. At the time of your impaired driving arrest, how much alcohol did you consume and in what period of time?

- 2. Why were you stopped (speeding, accident, sobriety checkpoint) and what time of the day were you arrested?
- 3. Did you feel intoxicated at the time of your arrest?
- 4. How much alcohol does it take for you to feel intoxicated?
- 5. When you drink alcohol, give me a range of how much? (least to most number of drinks per episode)
- 6. Has anyone expressed concern about your drinking/using substances?
- 7. Did you use any other substances such as prescription medications/other drugs on the day of your impaired driving offense?
- 8. How did this offense affect your alcohol/drug consumption?
- 9. What was your work or job status at the time of your current DWI arrest?
- 10. Have you had problems keeping a job?
- 11. Do you have any family history of alcohol/drug use?
- 12. Have you ever thought about or received mental health treatment?

#### 4.1.4 INTERVIEW

The individualized interview is the core of the assessment screening process and is required. The interpretation of all data: screening summary, driving record, interview by the SQP, and all other available information is critical in the development of each individual's referral to either education or rehabilitation.

Other items of consideration during the assessment screening interview should include BAC at time of arrest; prior treatment history; social, legal, or family problems; physical appearance, and review of any prior episode of care, if available.

It is estimated on average, the SQP will need to spend at least 20 to 30 minutes in the interview to confirm or clarify the information generated by the screening instrument. Some individuals with repeat and persistent offenses may require more time of the SQP to obtain detailed information

After the screening interview is complete, the SQP must document under the "Observation and Recommendations" section of the DRI-2 their reasons for making the recommendation. If the recommendation differs with the DRI-2, the justification for this decision and supporting information must be summarized here. Clinicians may attach additional summaries and documentation to the DRI-2 as necessary.

Assessment screening recommendations shall be based on "criteria established by the Department and the professional judgment of the SQP" as stated in the certification standards for SATOP. The professional judgment of the SQP must take into account the admission criteria established by the Department and base the recommendation on the "best interest" of the individual. "Best interest" is defined in the context of the education/rehabilitation of the individual in dealing with their substance use disorder. It does not mean the "SATOP agency's best interest", "the individual's attorney's best interest", or efforts in assisting the individual in obtaining their driver's license. It simply means the best education/treatment alternative given the needs of the individual.

In summary, assessment screening recommendations must:

- Meet certification standards and guidelines;
- · Be readily understood by the individual; and
- · Be readily understood by a reviewer.

#### 4.2 **ENVIRONMENT**

The assessment screening must be conducted in an environment that assures confidentiality for the individual served. Programs must adhere to federal confidentiality guidelines for substance use disorder treatment. DMH/DBH only recognizes official OMU sites that are conducted in an office, clinic, or other professional setting. The assessment screening office must meet the minimum outpatient office requirements outlined under Physical Environment and Safety 9 CSR 10-7.120, which can be found at: Missouri Secretary of State: Code of State Regulations (mo.gov).

#### 4.3 REFERRAL GUIDELINES

The SQP shall base program assignment on one's professional judgment, screening results, and referral guidelines established by the department, as follows:

- (A) 1st Offense—Offender Education Program (OEP) or Adolescent Diversion Education Program (ADEP) unless a more intense program is indicated by factors such as blood alcohol content at time of arrest, other alcohol- or drug-related arrests, results of the DRI-2, prior treatment for a substance use disorder, or occupational, relationship, medical, or other issues;
- (B) 2nd offense—Weekend Intervention Program (WIP) unless a more intense program is indicated by factors such as blood alcohol content at the time of arrest, other alcoholor drug-related arrests, results of the DRI-2, prior treatment for a substance use disorder, or occupational, relationship, medical, or other issues;
- (C) 3rd offense—Clinical Intervention Program (CIP) unless a more intense program is indicated by factors such as blood alcohol content at the time of arrest, other alcoholor drug- related arrests, results of the DRI-2, prior treatment for a substance use disorder, or occupational, relationship, medical, or other issues;
- (D) Prior and Persistent Offender—Serious and Repeat Offender Program (SROP). Individuals who have a BAC of 0.15 or greater at time of arrest, two (2) or more arrests for driving under the influence of alcohol or drugs with administrative action by the Department of Revenue, and meet diagnostic criteria for a substance use disorder, thereby meeting the statutory definition as a prior or persistent offender, shall be referred to intensive treatment.
  - 1. As used in these SATOP rules, the terms prior and persistent offender mean—
    - A. Prior offender, a person who has pleaded guilty to or has been found guilty of one (1) intoxication-related traffic offense, where such prior offense occurred within five (5) years of the occurrence of the intoxication-related traffic offense for which the person is charged;
    - B. Persistent offender, a person who has pleaded guilty to or has been found guilty of two (2) or more intoxication-related traffic offenses; a person who has pleaded guilty to or has been found guilty of involuntary manslaughter pursuant to section 565.024.1(2) or (3), RSMo; assault in the second degree pursuant to section

565.060.1(4), RSMo; assault of a law enforcement officer in the second degree pursuant to section 565.082.1(4), RSMo;

(E) Exceptions to these referral guidelines require prior approval from the department.

The key to an effective SATOP service referral is an accurate evaluation of the severity of an individual's alcohol and/or other substance use. The assessment screening process is the most important component in the SATOP process by placing the individual into the most appropriate level of intervention, thereby reducing the potential for a subsequent impaired driving offense.

#### 4.4 CHILDREN AND YOUTH ASSESSMENT

The Juvenile Profile (JP) is designed for screening individuals under the age of 18. The JP has 116 items and takes approximately 20 minutes to complete. It scores youth in terms of substance use, aggressiveness, and stress coping. High stress coping abilities scores indicate emotional or mental health problems may be present. For more information on the JP, contact Behavior Data Systems, Ltd. at 800-231-2401.

Participants who have been referred as a result of Minor in Possession (MIP), Zero Tolerance or an Abuse and Lose offense are required to complete the assessment screening whether or not they have a driver's license.

Individuals age 18 and younger who receive an assessment screening using the Juvenile Profile may be referred to the following:

- 1. ADEP; or
- Certified/accredited adolescent CSTAR treatment program. The Division of Behavioral Health requires that individuals under the age of 18 who are assigned to SUD treatment must be referred to a CSTAR adolescent treatment program.

The SQP, based on their best professional judgment, makes the final determination. If this determination varies from the DRI-2 and the above recommendations, the SQP must clearly outline their reason for this action on the assessment screening summary report.

#### 5 SATOP SERVICE LEVELS

- Offender Education Program (OEP Level I): A 10-hour education course designed for low risk individuals in understanding the choices they made that led to their intoxication and arrest.
- Adolescent Diversion Education Program (ADEP Level I): A 10-hour education course for minors who may have received Abuse and Lose, Minor in Possession, or Zero Tolerance offenses.
- Weekend Intervention Program (WIP Level II): A 20-hour level of service designed for repeat or high risk individuals using intensive education and counseling intervention methods over a weekend of structured activities.
- <u>Clinical Intervention Program (CIP Level III):</u> CIP is an outpatient treatment program designed specifically for persistent DWI offenders, or those identified during the

- assessment screening process as being "high risk" for chemical dependency. This program is designed to be completed within five weeks. The program provides 50 total hours of individual counseling, group counseling, and group education, with 10 hours focusing specifically on drinking and driving issues.
- <u>Serious and Repeat Offender Program (SROP Level IV)</u>: An outpatient SUD program
  consisting of at least 75 hours of treatment in no less than 90 days. Services must include
  a minimum of 35 hours of individual and/or group counseling. Successful completion of
  the treatment is left to the discretion of the program's clinical staff based on the specific
  needs of the consumer.
- <u>Traditional Treatment (Level IV)</u> Individuals presenting for SATOP services having multiple alcohol- or drug-related traffic offenses, or those at a high risk to reoffend, may receive a recommendation for more traditional substance use treatment. This treatment may be in the form of a residential or outpatient program, but must be completed at a state-certified or nationally accredited substance abuse treatment provider. For more information regarding substance use treatment and services visit the Department's website at: Services and Resources | dmh.mo.gov

#### **6 SATOP COMPLETION**

Successful completion of a SATOP requires that the individual:

- A. Is free from alcohol or illegal drug use when participating in services and, as applicable, uses prescription medication as prescribed.
- B. Attends all sessions on time:
- C. Attends sessions in their proper sequence unless the instructor approves an alternate schedule:
- D. Completes all assignments and cooperatively participates in all class activities;
- E. Pays all fees prior to program completion; and
- F. Completes and signs all required forms

#### 6.1 COMPLETION CERTIFICATE

SATOP Completion Certificate is issued to each individual within seven (7) calendar days of his/her successful completion of an education or treatment program.

- A. The OMU that completed the screening and made the program recommendation is responsible for issuing the SATOP Completion Certificate to the individual. The Department of Revenue receives automatic notification of each individual's successful program completion via the department's automated processing system.
- B. If an individual completes their assigned program with a provider other than the screening OMU, the provider of services notifies the originating OMU of the individual's successful program completion. Notification must be provided to the originating OMU in a timely manner to ensure the SATOP Completion Certificate is issued to the individual within seven (7) calendar days of successful program completion.
- C.If an individual completes a comparable program, an OMU must create the SATOP Completion Certificate and indicate that a comparable program was completed. Automated notification of the individual's successful program completion is provided to the department through the department's automated processing system.

Compliance. Failure to adhere to the stipulations, conditions, and requirements set forth in this rule shall be considered cause for revocation or denial of program certification.

#### 7 SATOP Program Certification

SATOPs must be located in an office, clinic, or other professional setting that allows for private, one-on-one interviews and ensures confidentiality for individuals served. The department must approve program location(s) prior to the delivery of services.

- (A) All SATOPs shall comply with 9 CSR 30-3.032
- (B) CIPs and SROPs shall comply with <u>9 CSR 30-3.130</u> and fulfill department contract requirements
- (C) The following rules are waived for OMUs, OEPs, ADEPs, and WIPs unless the department determines a specific requirement is applicable due to the unique circumstances and service delivery methods of a program:
  - 1. 9 CSR 10-7.030;
  - 2. 9 CSR 10-7.060;
  - 3. 9 CSR 10-7.080;
  - 4. 9 CSR 30-3.100; and
  - 5. 9 CSR 30-3.110
- (D) Other Requirements. In addition to the requirements listed under 9 CSR 30-3.032, the department uses the following criteria in certifying Substance Awareness Traffic Offender Programs:
  - The department reserves the right to limit the issuance of SATOP certification in areas of the state where it cannot be determined a need exists for the service and/or it cannot be determined the proposed service will serve the best interest of individuals in that area.
  - 2. Determination of need is at the department's sole discretion as the designated state authority responsible for SATOP certification.
  - 3. The determination of need is based on applicable data, such as the number of DWI/DUI arrests and the number of currently certified SATOPs within the proposed service area:
  - The department must approve any new program site prior to the delivery of SATOP services at the site; and
  - 5. The department reserves the right to deny certification to any SATOP that does not provide a minimum of services for at least fifty (50) persons per year.

#### 8 SATOP Administration and Service Documentation

(1) Access. The program shall be accessible to the public by maintaining reasonable business hours and ready telephone access.

- (2) Admission. Substance Awareness Traffic Offender Programs (SATOPs) shall accept individuals referred by a court order, condition of probation or parole, or plea bargain who have had their driver's license administratively revoked or suspended for reasons of an alcohol- or drug-related traffic offense. Individuals will be screened by a qualified staff person to determine program placement. Women who are pregnant must be referred to a department-certified women's treatment program for a clinical assessment to determine service needs.
- (3) Conflict of Interest. An agency which operates probation services, court supervision programs, or counseling programs not certified by the department must keep these functions separate and distinct from SATOP.
  - (A) The agency must clearly communicate to individuals that completion or the failure to complete these programs will not affect the outcome of their participation in SATOP.
- (4) Notice to Individuals Served. Written notice shall be provided to individuals regarding the cost of the program, dates, times, location, and requirements for successful program completion.
- (5) Attendance Records. Attendance records shall be maintained for each session.
- (6) Receipts. Receipts shall be issued for all fees collected from individuals enrolled in a SATOP.
- (7) Program Participation. All SATOPs shall have written policies and procedures which are followed by staff to manage situations in which an individual arrives at a program under the influence of alcohol and/or illegal drugs, is not taking prescription medication(s) as directed, or is detracting from a program due to uncooperative behavior.
  - (A) A written report of the situation shall be prepared by the staff person(s) involved. The report shall be reviewed by the program administrator who is responsible for determining the individual's continued participation in the program.
  - (B) A person who has justifiably been denied access or is removed from a program is not considered to have satisfactorily completed the program.
  - (C) Readmission to a program for an individual who has justifiably been denied access or removed shall be in accordance with the program's policies and procedures. Proactive measures should be taken to assist individuals in reengaging in services and successfully completing a program.
  - (D) Individuals who continue to actively use alcohol and/or illegal drugs, or do not take prescribed medication as directed while enrolled in a program, may be referred to more intensive services such as withdrawal management and substance use disorder treatment with residential support. In these instances, the individual may fulfill SATOP requirements by completing a comparable program.

#### 8.1 Program Evaluation

All persons participating in a SATOP shall be asked to complete a course evaluation. The evaluation process must assure anonymity.

(A) Participants may be encouraged, but not required, to sign the evaluation form.

#### 8.2 DATA COLLECTION

The program shall cooperate with all SATOP quality assurance and data collection requirements regarding the program operation, individual demographics, or other data collection that may be required by the department.

#### 8.3 ORGANIZED RECORD SYSTEM AND INDIVIDUALIZED RECORDS

All SATOPs must maintain an organized record system, which ensures easily retrievable, complete, and usable records. Records must be stored in a secure and confidential manner in accordance with state and federal requirements.

- (A) Records required by the department shall be maintained in paper form or electronic medium at the location services are provided or at the provider's address of record with the department.
- (B) Copies of records must be provided upon request by the department or its authorized representative(s), regardless of the medium in which they are maintained.
- (C) Individual records must be retained for at least six (6) years or until all litigation, adverse audit findings, or both, are resolved regardless of the medium in which they are maintained.
- (D) Individual records for OMUs shall include, but are not limited to:
  - Demographic information;
  - 2. Proper signed release of information forms, as applicable;
  - 3. Signed acknowledgement by the individual indicating receipt of individual rights, responsibilities, and grievance procedures;
  - 4. Screening recommendation;
  - 5. Notice of option for a second opinion and judicial review;
  - 6. List of referral sources; and
  - 7. Notice that services may be obtained from another provider;
  - 8. Driving record check by the Department of Revenue (if another source is used, provider is responsible for ensuring its reliability);
  - Documentation of an individualized screening including date administered, name and signature of the SATOP Qualified Professional, summary of results including substance use history, and education or treatment recommendation;
  - 10. SATOP Offender Assignment form; and
  - 11. SATOP Completion Certificate (if program was completed).

- (E) Individual records for persons enrolled in an education program shall include, but are not limited to:
  - 1. Dates of attendance;
  - 2. Demographic information;
  - 3. Scored pretest(s) and posttest(s) measuring knowledge gain and attitude change;
  - 4. Proper signed release of information forms, as applicable;
  - 5. Signed acknowledgement by the individual indicating receipt of individual rights, responsibilities, and grievance procedures, list of referral sources, and notice that services may be obtained from another provider;
  - 6. Results of blood alcohol content (BAC) tests, as applicable;
  - 7. SATOP Offender Assignment form; and
  - 8. SATOP Completion Certificate (if program was completed).
- (F) Individual records for persons enrolled in the Clinical Intervention Program and Serious and Repeat Offender Program shall include, but are not limited to:
  - 1. Consent to treatment;
  - 2. Proper signed release of information forms, as applicable;
  - 3. Diagnosis by a licensed diagnostician, including substance use and mental health;
  - 4. Individual signed treatment plan;
  - 5. Treatment plan reviews and updates;
  - 6. Continuing recovery plan based upon the principles of recovery and resilience as identified in <u>9 CSR 10-7.010(7)</u> including at a minimum:
    - A. Date of next appointment for follow-up services or other supports;
    - B. Action steps to access personal support system(s) or other resources to assist in continuing his/her recovery, well- being, and community integration or if symptoms recur and additional services/supports are needed;
    - C. Instructions for safe use of medication(s) as prescribed; and
    - D. Referral information such as contact name, telephone number, locations, hours, and days of services, when applicable;
  - 7. Discharge plan that includes, but is not limited to:
    - A. Admission date:
    - B. Reason for admission;
    - C. Referral source;
    - D. Reason for or type of discharge;
    - E. Date of discharge;
    - F. Description of services provided and the extent to which established goals and objectives were achieved;
    - G. Recommendations for continued services and supports;
    - H. Medical status and information on medication(s) prescribed or administered, when applicable;
    - I. Signature of staff completing the plan.

## 8.4 ADDITIONAL RECORD REQUIREMENTS FOR THE ADOLESCENT DIVERSION EDUCATION PROGRAM (ADEP)

For individuals participating in the ADEP who are under the age of eighteen (18) and are not emancipated, there shall be documentation showing:

- (A) Efforts to involve the parent or guardian in the program;
- (B) Results of the efforts, that is, whether the parent or guardian participated and the extent of participation; and
- (C) Where applicable, the parent or guardian's view of substance use patterns and possible effects on family, social, legal, emotional, physical, financial, educational, and vocational functioning.

#### 8.5 COMPLIANCE

Failure to adhere to the stipulations, conditions, and the requirements set forth in this rule shall be considered cause for revocation or denial of program certification.

#### 8.6 SATOP PERSONNEL

This section describes the personnel policies and staff qualifications for Substance Awareness Traffic Offender Programs and establishes specific policies and procedures for the revocation or suspension of credentialed personnel. This information can also be found in: <u>9 CSR 30-3.204</u>

#### 8.7 QUALIFICATIONS OF STAFF

Staff must have specialized training in providing services for individuals who have been arrested for an alcohol- and/or drug-related traffic offense.

- (A) Staff must be credentialed by the Missouri Credentialing Board, 428 E. Capitol Avenue, 2nd Floor, Jefferson City, MO 65101, and must meet the designated requirements prior to the delivery of services. Substance Awareness Traffic Offender Programs (SATOP) credentials include:
  - 1. SATOP Qualified Professional (SQP); and
  - 2. SATOP Qualified Instructor (SQI)
- (B) SATOP screenings shall be conducted by a SQP.
- (C) Treatment services shall be provided by an SQI, SQP or Qualified Addiction Professional.
- (D) Education services shall be provided by a SQP or SQI.
- (E) Staff who administer screenings and provide education and treatment services shall:
  - Not have a suspension or revocation of their driver's license within the preceding two

     (2) years of administering screenings or providing education and treatment services.
     Verification of staff driving records shall be completed annually and maintained in
     personnel records;

- Not have received a citation or been charged with any state or municipal alcohol- or drug-related offense within the preceding two (2) years of administering screenings and providing education and treatment services, except when found not guilty in a court of competent jurisdiction;
- 3) Not have allowed the use of alcohol, illegal drugs, or misuse of prescription medications to interfere with the conduct of their SATOP job duties;
- 4) Attend SATOP trainings offered or approved by the department; and
- 5) Meet background screening requirements specified in <u>9 CSR 10-5.190</u>.

#### 8.8 REPORTING REQUIREMENTS

Administrators and staff of a certified SATOP have the duty to report to the department the suspected failure of any individual to meet applicable program standards and requirements.

Complaints or allegations which must be reported to the department include:

- 1. Failure of a SATOP to meet personnel requirements under this rule;
- 2. Violations of individual rights under 9 CSR 10-7.020;
- 3. Fraudulent or false reporting to the department, Department of Revenue, courts, or other entity;
- 4. Performance of duties for which an individual is not appropriately credentialed;
- 5. Conviction, plea of guilty, or suspended imposition of sentence for any felony or alcoholor drug-related offense;
- 6. Failure to cooperate in any investigation by the department or authorized by the department;
- 7. Abuse, neglect, or misuse of funds/property in accordance with 9 CSR 10-5.200; and
- 8. Offenses considered disqualifying crimes under section 630.170, RSMo.

#### 8.9 GUEST SPEAKERS

A program which utilizes guest speakers shall have written policies and procedures for their recruitment, selection, training, supervision, dismissal, and compensation.

- 1. The program shall maintain a roster of all approved guest speakers and a description of the duties or tasks of each.
- 2. Guest speakers are not considered instructors for the purpose of these rules.
- 3. At no time shall a guest speaker assume sole responsibility for a class.

#### 8.10 COMPLIANCE

Failure to adhere to stipulations, conditions, and requirements set forth in this rule shall be considered cause for revocation or denial of program certification.

#### 9 PROGRAM SPECIFIC INFORMATION

## 9.1 OFFENDER EDUCATION PROGRAM (OEP) AND ADOLESCENT DIVERSION EDUCATION PROGRAM (ADEP)

The OEP and ADEP are designed for individuals with a first time alcohol or drug impaired driving offense and determined to be low-risk for a future related arrest. Educational sessions and discussions focus on helping individuals assess their personal responsibility related to alcohol and drug impaired driving.

#### 9.1.1 OEP/ADEP PROGRAM REQUIREMENTS

OEPs and ADEPs must maintain a contract with the department and conduct the respective program in accordance with the 2017 edition of the *OEP Missouri Curriculum Guide* or the 2014 edition of the *ADEP Missouri Curriculum Guide* produced by The Change Companies, 5221 Sigstrom Dr., Carson City, NV 89706. Their website is: <a href="www.changecompanies.net">www.changecompanies.net</a>. Prior approval from the department is required to alter the content and methods in the curriculum guides incorporated herein by reference. The referenced guides do not include any later amendments or additions.

Program size must ensure the opportunity for participation from individuals in attendance. Group sessions are limited to thirty (30) individuals. Parents, guardians, or other natural supports who attend a session or part of a session are not included in the limit of thirty (30) individuals.

Prior to successful program completion, each individual must develop a personal plan of action to assist them in preventing future alcohol and drug-impaired driving behavior.

#### 9.1.2 PROGRAM HOURS

At least ten (10) hours of education and discussion must be provided to individuals over a period of at least two (2) calendar days. Sessions shall not exceed six (6) hours per day (excluding breaks) and should begin and end at times that are accessible for participants. No more than twenty percent (20%) of the educational component may consist of electronic media/ audiovisual aids.

#### 9.1.3 ALCOHOL & DRUG TESTING

Testing of blood, breath or urine is not required or used in this program. Individuals who arrive under the influence of mood-altering substances must be denied access to any program. Those who detract from any program because of uncooperative behavior must be removed from the program. A written report of the incident must be made by the program staff and reviewed by the administrator who must make a final recommendation. A person who has justifiably been denied access to or removed from a program shall not be considered to have satisfactorily completed the program. Agencies must include a policy on alcohol and drug testing into their policy and procedures manual.

#### 9.1.4 QUALIFIED STAFF

Only staff certified through the Missouri Credentialing Board as a Qualified Instructor (QI) or as a SATOP Qualified Professional (SQP) may serve as instructors for the OEP.

#### 9.1.5 ADOLESCENT DIVERSION EDUCATION PROGRAM (ADEP)

The Adolescent Diversion Education Program (ADEP) is a specific SATOP designed to provide rehabilitative support for individuals who are under the age of eighteen. When an individual is under the age of eighteen and is not emancipated, the agency must have the parent or guardian sign appropriate documentation.

The ADEP is a basic education program for individuals under the age of 18 who have been determined to be low risk and have been charged with or convicted of certain alcohol and drug-related driving offenses. The ADEP must be separate and distinct from the OEP. Adults (age 18 and above) cannot attend the ADEP.

#### 9.1.6 RECORD REQUIREMENTS

For individuals under the age of eighteen who are not emancipated, there are additional documentation requirements which include:

- Efforts to involve the parent or guardian in the program;
- Results of the efforts, extent of parent/guardian participation; and;
- Where applicable, the parent or guardian's view of substance use patterns and possible effects on family, social, legal, emotional, physical, financial, educational and vocational functioning.

#### 9.1.7 MINORS AND THE NEED FOR TREATMENT

Individuals under the age of eighteen (18) assessed as needing Substance Use Disorder (SUD) treatment shall be referred to and successfully complete an SUD treatment program for adolescents. The program must be certified by the department or nationally accredited to provide services for adolescents.

#### 9.2 WEEKEND INTERVENTION PROGRAM (WIP)

The WIP is designated for individuals with a second alcohol or drug impaired driving offense and those identified through the SATOP screening as being a moderate risk, first-time driving while intoxicated or driving under the influence (DWI/DUI) offender.

#### 9.2.1 WIP OBJECTIVES

- 1. To educate the individual about the harmful effects of substance use;
- 2. To prompt a self-awareness of an individual's own level of harmful involvement with alcohol/drugs and to help the offender identify what he/she needs to make better choices, and:
- 3. To provide an in-depth assessment of the individual's level of harmful involvement with alcohol/drugs and their motivation for change; and
- 4. To educate the individual about resources available to facilitate and/or maintain the change process in abstaining from substances that can lead to impairment and driving.

#### 9.2.2 WIP REQUIREMENTS

(A) WIPs must maintain a contract with the department and conduct the program in accordance with the 2017 edition of the WIP Missouri Curriculum Guide produced by The Change

Companies, 5221 Sigstrom Dr., Carson City, NV 89706. Prior approval from the department is required to alter the content and methods in the curriculum guide incorporated herein by reference. The referenced guide does not include any later amendments or additions.

- (B) The WIP is an intensive education program conducted during a forty-eight (48) hour weekend in a supervised and structured location approved by the department. Sessions shall begin and end at times that are accessible for participants.
- (C) The program requires a minimum of twenty (20) hours of combined individual counseling and group education and discussion that assists individuals in assessing their personal responsibility related to alcohol and drug-impaired driving and taking proactive steps to prevent future occurrences of impaired driving.
  - 1. Individual counseling shall be provided by an SQP/SQI.
  - 2. Small group discussions shall be facilitated by at least one (1) SQP or Qualified Addiction Professional (QAP) per twelve (12) participants. In the event two (2) staff co-facilitate a small group, one (1) of the staff may be a SATOP Qualified Instructor or an Associate Alcohol Drug Counselor if the group size does not exceed twenty-four (24) individuals.
  - 3. Group education sessions shall not exceed thirty (30) individuals per staff member, including lectures and audiovisual presentations. Group education shall be conducted by a SQP or SQL
- (D) Meals and snacks shall be provided for individuals participating in the WIP at times comparable to normal meal times in the community by agencies providing the program in-house. Preparation and management of meals and snacks must meet applicable state, county, and/or city health regulations.
- (E) Instructional aids shall be incorporated into education sessions to enhance understanding and promote discussion and interaction among participants. Aids may include, but are not limited to, DVD's or other electronic media, worksheets, and informational handouts and shall not comprise more than twenty percent (20%) of group education sessions.
- (F) Guest speakers may be utilized in education sessions but shall not comprise more than twenty percent (20%) of the educational component of the program.

#### 9.2.3 PROGRAM HOURS

During a 48 hour weekend, a minimum of 20 program hours must be completed

#### 9.2.4 ALCOHOL & DRUG TESTING

WIPs may use breath or urine testing when alcohol or other drug usage is suspected, but cannot otherwise be verified, during the course of the WIP weekend. A written report of the incident must be made and reviewed by the WIP director who will make the final decision as to a consumer's suitability for continuation in the program. Random breath or urine testing must not be used. Agencies must include a policy on alcohol and drug testing into their policy and procedures manual.

#### 9.2.5 QUALIFIED STAFF

Qualified Instructors (Ql's) must provide educational lectures. SQP's must provide educational lectures, as well as facilitate group activities.

#### 9.2.6 REQUIRED DOCUMENTATION

- SATOP Offender Assignment Form (A-Form)
- Proper receipts
- Individual Rights, Grievances, and Expectations
- Consent form(s)
- Certificate of Completion and Notice of Recommendations
- Notice of cost
- Standard Means information
- Pre and Post Test
- Program Checklist
- Course Evaluation Form
- Notice of Offender Completion Form (C-Form)
- One individual session documented-Personal Change Plan
- WIP Notice to Participants
- WIP Individual Counseling Session
- WIP Certificate of Completion and Notice of Recommendations

#### 9.3 CLINICAL INTERVENTION PROGRAM (CIP)

The CIP is an intensive outpatient treatment program designed specifically for persistent DWI offenders or high-risk first offenders identified during the SATOP screening process as meeting diagnostic criteria for a substance use disorder or being at risk for a substance use disorder. Services focus on substance use disorders and the resolution of problems related to substance use and the individual's drinking and driving.

- (A) CIPs must maintain a contract with the department and comply with 9 CSR 30-3.130
- (B) An SQP or QAP shall utilize a department-approved instrument to administer a comprehensive assessment for each individual admitted to the program. A licensed diagnostician must sign off on the assessment of an individual assigned to the CIP acknowledging an individual meets diagnostic criteria for admission.
  - 1. Assessment results shall be utilized to develop an individual treatment plan. Treatment plan reviews and updates shall be conducted as specified in 9 CSR 10-7.030.
  - Family members and/or other natural supports shall be involved in the development of the individual treatment plan, as appropriate and allowable. The reason(s) for nonparticipation of family members/natural supports shall be documented in the individual record.
- (C) Individual and group counseling sessions must be facilitated by a Qualified Addiction Professional or SQP. Group counseling sessions are limited to twelve (12) individuals per staff

member. In order to accommodate individuals in accessing services, group size may be greater than twelve (12) individuals with approval from the department.

(D) Group education sessions shall be facilitated by a QAP, SQP or SQI. Group education sessions are limited to thirty (30) individuals per staff member.

#### 9.3.1 Program Hours

Each individual admitted to a CIP must complete fifty (50) hours of therapeutic, structured activities through a combination of individual and group counseling and group education in accordance with contract requirements. Services and activities must be accessible to individuals who are employed, in school, have family/childcare responsibilities, or other obligations.

Breakdown of the required hours:

- 1) 2 hours can be counted toward the total for the time spent on the Initial Standardized Assessment Protocol (ISAP), the assessment and treatment planning;
- 2) 8 hours of individual counseling;
- 3) 20 hours of group education; and
- 4) 20 hours of group counseling.

The CIP is intended to be completed over a six (6) to eight (8) week time period and should not be completed in less than (3) weeks nor extend beyond six (6) months. The actual time period for completion of the program is based on individual needs.

#### 9.3.2 ALCOHOL AND DRUG TESTING

A blood alcohol content (BAC) or urine test shall be conducted for each individual a minimum of one (1) time per week. Random BAC tests and/or urine tests may also be conducted. All test results shall be documented in the individual record.

Agencies have the option to administer an Ethyl Glucuronide (ETG) Test to determine an individual's use of alcohol for up to 72 hours. The ETG screen is limited to one screen per EOC with a maximum amount of up to \$60.00

#### 9.3.3 Medication Assisted Treatment (MAT)

MAT is the use of medication, combined with counseling and behavioral therapies to treat substance use disorders (SUDs). <u>Medications</u> approved <u>Food and Drug Administration</u> (<u>FDA</u>) relieve the withdrawal symptoms and psychological cravings that cause chemical imbalances in the body.

The FDA has approved several different medications to treat alcohol use disorders (AUD) and opioid use disorders (OUD). Agencies are required to educate individuals assigned to a treatment program on the efficacy of medications in recovery and collaborate with the individual and prescribing physician to determine whom is an appropriate candidate.

#### 9.3.4 DOCUMENTATION

Program documentation should parallel existing outpatient documentation requirements. At minimum, programs should meet the requirements set out in <u>9 CSR 30-3.600</u> for Outpatient Records.

#### 9.4 Serious and Repeat Offender Program (SROP)

The SROP addresses the needs of high-risk, high-need adults who have a DWI/DUI offense and meet criteria for a moderate to severe substance use disorder. Services focus on substance use disorders and the resolution of problems related to substance use and the individual's drinking and driving behavior.

- (A) SROPs must maintain a contract with the department and comply with 9 CSR 30-3.130
- (B) A SQP or Qualified Addiction Professional shall utilize a department-approved instrument to administer a comprehensive clinical assessment for each individual admitted to the program.
  - 1. A licensed diagnostician must sign off on the assessment of an individual assigned to the SROP acknowledging an individual meets diagnostic criteria for admission.
  - 2. Assessment results shall be utilized to develop an individual treatment plan. Treatment plan reviews and updates shall be conducted as specified in 9 CSR 10-7.030.
  - Family members and/or other natural supports shall be involved in the development of the individual treatment plan, as appropriate and allowable. The reason(s) for nonparticipation of family members/natural supports shall be documented in the individual record.

SROP is designed specifically to address the significant treatment needs of individuals that meet diagnostic criteria for a moderate to severe substance use disorder with the potential for recidivism. Services focus on substance use disorders and the resolution of problems related to substance use and the individual's drinking and driving behavior. Additional SROP criteria includes:

- Individual has a blood alcohol content (BAC) of .15% or higher at the time of arrest;
- Individual has been arrested two or more times with administrative action by the Department of Revenue for driving under the influence of alcohol or drugs; and
- Individual meets diagnostic criteria for a substance use disorder, thereby meeting the statutory definition as a prior or persistent offender.

Services focus on substance use disorders and the resolution of problems related to substance use and the individual's drinking and driving behavior.

The SROP offers a comprehensive array of individualized therapeutic interventions to address the unique needs of the individual. The following services are included:

- Assessment
- Group Counseling (including trauma-specific and co-occurring disorders)
- Group Rehabilitative Support (including trauma-specific and co-occurring disorders)
- Medication Services Support Case Management/Community Support
- Family Therapy
- HIV Pre-Test Counseling
- HIV and TB Post-Test Counseling
- Individual Counseling (including trauma and co-occurring disorders)
- Family Conference
- Vocational Support

#### 9.4.1 PROGRAM HOURS

Each individual admitted to a SROP must complete a minimum of seventy-five (75) hours of therapeutic, structured activities through a combination of individual and group counseling and group education in accordance with contract requirements. Services shall be structured to address the specific and unique needs of serious and repeat DWI/DUI offenders.

Services shall include at least thirty-five (35) hours of individual and group counseling provided by a Qualified Addiction Professional or SQP. Group counseling sessions are limited to twelve (12) individuals per staff member. In order to accommodate individuals in accessing services, group size may be greater than twelve (12) individuals with approval from the DBH. Services shall be based on individual needs and should be completed in no less than ninety (90) days.

#### 9.4.2 SCREENING

Individuals who present to a contracted Serious and Repeat Offender Program (SROP) as a DWI court referral are not required to complete the Driver Risk Inventory-2 screening tool. When the DRI 2 is not completed, the individual shall not be charged the screening fee. The Division of Behavioral Health recognizes that agencies working with DWI court referrals typically serve individuals with felony-level impaired driving offenses that require a comprehensive level of treatment intervention services.

The individual is still required to pay the SATOP supplemental fee and program fee. Agencies are required to:

- Complete an assessment and required screenings in the Department's Customer Information Management, Outcomes, and Reporting (CIMOR) database in order to assign the individual to the SROP;
- Maintain a copy of the individual's Missouri Driving Record which is no more than six (6) months old at the time of intake; and
- Enter comments under the "Assessment Factors" tab on the "SATOP Screening" page noting the consumer as a "DWI Court Participant."

#### 9.4.3 ASSESSMENT AND TREATMENT PLANNING

An SQP or Qualified Addiction Professional shall utilize a department-approved instrument to administer a comprehensive clinical assessment for each individual admitted to the program. Assessment results shall be utilized to develop an individual treatment plan. Treatment plan reviews and updates shall be conducted as specified in <u>9 CSR 10-7.030</u>. A licensed diagnostician must sign off on the assessment of an individual assigned to the SROP acknowledging an individual meets diagnostic criteria for admission.

#### 9.4.4 INVOLVEMENT OF FAMILY MEMBERS/NATURAL SUPPORTS

Family members and/or other natural supports shall be involved in the development of the individual treatment plan, as appropriate and allowable. The reason(s) for nonparticipation of family members/natural supports shall be documented in the individual record.

#### 10 COMPARABLE PROGRAMS

Individuals required to complete SATOP have the option to meet the requirement through completing a comparable program.

#### 10.1 Out of State Residents

Individuals who have received an alcohol or drug related traffic offense in Missouri, but live in or have moved to another state must complete a SATOP or comparable program to be eligible for license reinstatement.

To complete a comparable program, the individual must have a drug and alcohol screening and complete the recommendation of the screening. The provider of the screening and provider of services must be certified by the state of residence and/or be accredited by The Joint Commission (TJC) as a drug and alcohol treatment program. The individual must complete a drug and alcohol assessment with a written recommendation by the professional.

In order to meet SATOP requirements, the minimum recommended level of drug and alcohol education/treatment is 10 hours. The program must also complete the SATOP Comparable Program Completion form, following the instructions on the form. The DBH makes the final determination regarding the acceptability of the out-of-state program. The form and \$249 supplemental fee must be sent to SATOP DBH Central Office. Out-of-state comparable forms are only processed through the SATOP unit at the Division of Behavioral Health's Central Office in Jefferson City.

Send a copy of a completed Missouri Comparable Program Form or proof of program completion to MO Department of Mental Health by one of the following methods:

- 1. E-mail to satop@dmh.mo.gov;
- 2. Mail to Department of Mental Health, Controller's Office, SATOP, PO Box 596, Jefferson City, MO 65102-059; or
- 3. Submit electronically to the department by accessing the form at: <a href="https://dmh.mo.gov/media/pdf/satop-comparable-program-completion-form">https://dmh.mo.gov/media/pdf/satop-comparable-program-completion-form</a>.

Payment of the SATOP Supplemental Fee\* for a SATOP Comparable Program must be submitted to the department by one of the following methods:

- 1. Electronic payment following the instructions at: Payment Page: or
- 2. Mail the supplemental fee of two-hundred and forty-nine dollar (\$249) in the form of a signed money order made payable to the Mental Health Earnings Fund, Department of Mental Health, Controller's Office, SATOP, PO Box 596, Jefferson City, MO 65102-059.

The supplement fee should not be paid until after the SATOP Comparable Completion form has been submitted in accordance with the instructions.

The SATOP Central Office will verify your information and forward completion to the Driver and Vehicle Services Bureau of the MO Department of Revenue.

The SATOP unit will send a receipt for the \$249 supplemental fee payment.

#### 10.2 MISSOURI RESIDENTS

Missouri residents must complete a Missouri SATOP or Missouri Comparable Program.

The individual must receive an assessment and complete a program that is a state-certified and/or accredited (TJC, CARF International, and/or COA) as an alcohol and drug treatment rehabilitation program. The individual must successfully complete a minimum of 120 hours of treatment. Of the 120 hours, 40 hours must be individual and/or group counseling. The remaining hours may include any combination of the following: driver-related education, individual counseling, group counseling, group rehabilitative support, and family therapy.

Individuals who complete approved programs at an accredited treatment and rehabilitation program may present documentation of such completion to an OMU. A SATOP assessment screening is not required. The OMU will complete the Offender Completion Certificate for those individuals. The Completion Certificate is sent electronically to the Department of Revenue (DOR). A copy of the certificate must be given to the individual for their personal records. A \$249 supplemental fee must be collected from these individuals. The OMU may charge an additional \$46 processing fee.

#### 10.3 DEPARTMENT OF CORRECTIONS PROGRAMS

Substance use disorder treatment programs provided at a Missouri Department of Corrections institution may meet the SATOP comparable program requirements. Individuals must contact the Department of Corrections to obtain assistance with filling out the SATOP Comparable Program Completion Form. The Form can be found at:

SATOP Comparable Program Completion Form | dmh.mo.gov

#### 10.4 OTHER COMPARABLE PROGRAMS

Veteran's Affairs Medical Center, Military, and Federal Bureau of Prisons programs may also be accepted as comparable

#### 10.5 SATOP ELIGIBILITY REQUIREMENTS

Individuals presenting for services contracted under the SATOP are eligible for the following reasons to participate in the program. Only those individuals needing to complete the SATOP due to administrative action on a Missouri driver's license are eligible for supplemental assistance for WIP, CIP, and the SROP.

- Court order
- Impaired driving offense with administrative action
- Court referral
- Minor in Possession
- Zero Tolerance Offense
- Abuse and Lose
- Meeting a requirement for an out of state driving offense

#### 11.1 NON-ENGLISH SPEAKING OR ENGLISH AS A SECOND LANGUAGE

Individuals who do not speak English and require an interpreter must be accepted by SATOPs at all service levels. If assistance is needed in locating a foreign language interpreter, please contact DBH. There is a billing service code available for the use of Alt Language Interpreting services for the OEP, WIP, CIP, and SROP.

The use of family members or friends as interpreters in SATOP is not a preferred method for communicating with individuals who are non-English speaking. The use of family members/friends could compromise the effectiveness of communication with an individual.

If an individual prefers a family member or friend to interpret, staff may utilize this option only if it is determined that doing so will not compromise the effectiveness of the interpretation or violate the individual's right to confidentiality.

If the individual's choice is to waive their right to a foreign language interpreter, they must be aware that the family member or friend must be available to interpret for them throughout the entire program. For example, if the friend or family member accompanies them to an assessment screening and it is determined the individual must complete a CIP, that same person must be available to provide interpretation services for the duration of the program

#### 11.2 DEAF AND HARD OF HEARING (D/HH)

Regulations implementing Title II of the Americans with Disabilities Act (28 CFR Part 35) and Section 1557 of the Affordable Care Act (45 CFR Part 92) apply to all programs, services, and activities provided or made available by the Department of Mental Health. This includes programs, services, and activities made available through contract, licensure, certification, or other arrangement. Regulations implementing Title III of the Americans with Disabilities Act (28 CFR Part 36) and Section 1557 of the Affordable Care Act apply to most private entities providing health services to the public, including mental health and substance use treatment services.

All DMH programs, services, and activities must provide:

- Equal opportunity for deaf and hard of hearing (D/HH) individuals to participate and to obtain the same benefit as other individuals;
- Communication for D/HH individuals that is as effective as communication with others;
- Reasonable modifications of policies, practices, and procedures when needed to afford equal access, equal opportunity, or equally effective communication;
- Auxiliary aids and services, including interpreters, when necessary for effective communication;
- An opportunity for D/HH individuals to request their preferred means of communication, including preferred auxiliary aids and services.
- Primary consideration to the auxiliary aids and services requested by the D/HH individual;
   and

 Notification of rights, including how to request auxiliary aids and services and how to file a grievance or complaint.

All DMH programs, services, and activities shall not:

- Deny services or equal opportunity to a D/HH individual on the basis that the individual is D/HH or requires auxiliary aids or services for effective communication;
- Deny a requested auxiliary aid or service without obtaining a written decision from the DMH director or his/her designee or proposing an alternative that would provide equally effective communication:
- Require or request that a D/HH individual provide their own interpreter;
- Use an individual as an interpreter who is not licensed and appropriately certified as an interpreter by the State and qualified to interpret for a particular assignment; or
- Deny services to or otherwise retaliate against an individual on the basis that the individual has asserted a right protected by the ADA or Section 1557, including the right to participate in a grievance or complaint.

Any allegations of noncompliance with a referenced law or regulation must be reported to DMH.

Individuals who identify their primary language as American Sign Language (ASL) must receive services from staff whose ASL fluency is documented with the DMH Office of Deaf Services or through qualified, appropriately certified sign language interpreters unless the individual voluntarily requests an alternative. Interpreters who have completed 40 hours of DMH-approved mental health interpreting training receive preferential hiring.

Individuals who are deaf should not be expected lip-read as this is generally an ineffective form of communication. Individuals who are hard of hearing may or may not be able to speech-read (lip-reading combined with other visual cues and listening) depending on their degree and quality of residual hearing, amplification, training, and other factors. Do not assume a D/HH individual is able to lip-read or speech-read.

Individuals who are deaf and use ASL as their primary language may have dysfluency in ASL due to delayed exposure to accessible language or other factors. Deaf individuals also may have low literacy or be functionally illiterate in English due to educational experiences and having English as a second language. While many deaf individuals have eloquent native fluency in ASL and mastery of English literacy, many do not. Language and literacy skills should not be assumed, and particular attention needs to be paid to the reading level of written materials. A Deaf person with significant dysfluency in ASL may need an ASL/English interpreter who specializes in dysfluency or a Certified Deaf Interpreter in addition to an ASL/English Interpreter. Written materials, including captioned videos which exceed an individual's literacy may need to be interpreted into ASL.

ASL involves the use of grammatical and morphological facial expressions, and speech-reading requires an unobstructed view of the mouth. Mask-wearing policies may need to be modified for communication with D/HH individuals either by making an exception to masking requirements when the risk is reasonable or can be mitigated to a reasonable level by alternative means or by using masks with a transparent insert.

For training resources, assistance in locating an interpreter, or otherwise determining needs, requirements, or locating resources for communication access, please contact:

DMH Office of Deaf Services David Kingsbury, MA, Director (573) 526-1857 david.kingsbury@dmh.mo.gov dmh.mo.gov/deafservices

#### 11.3 MENTAL ILLNESS

Individuals who have a serious emotional disorder or serious mental illness which may interfere with his/her participation in SATOP shall be referred to a qualified mental health professional for an evaluation. Participation in SATOP may be delayed until the individual's mental health needs are evaluated and necessary services are obtained. In order to promptly arrange the mental health evaluation, a SATOP conducting assessment screenings should maintain a formal affiliation agreement with either a certified or accredited mental health program or a licensed mental health practitioner.

#### 11.4 PREGNANT WOMEN

Women who are pregnant must be evaluated for possible treatment and/or withdrawal management needs. Fetal Alcohol Spectrum Disorders (FASDs) are a group of conditions that can occur in a person who was exposed to alcohol before birth and must be considered when serving this population.

In the event a woman who is pregnant is screened and assigned to a treatment program, a referral must be made to a certified Women and Children's CSTAR program: <a href="https://dmh.mo.gov/media/pdf/directory-women-and-children-substance-use-treatment-programs">https://dmh.mo.gov/media/pdf/directory-women-and-children-substance-use-treatment-programs</a>. The referral must be documented in the individual record.

#### 11.5 SATOP COMPLETIONS FOR NON-U.S. CITIZENS

DBH recognizes that individuals may present for a SATOP completion without a Social Security Number (SSN). In these instances, the individual may be entered into CIMOR in order to obtain a completion certificate when the following requirements are met by the agency:

- The agency must attempt to obtain immigration documents indicating the individual's residency status to determine proof of lawful presence, Missouri residency, and eligibility for supplemental assistance.
- The Standard Means Test would apply to individuals that demonstrate proof of lawful presence in the United States and residency in Missouri.
- Full SATOP fees and charges for program services must be paid by the individual if a SSN, nor legal residency, can be verified. This is in accordance with section 208.009.1, RSMo, which states that "no alien unlawfully present in the United States shall receive any state or local public benefit.

In those instances wherein a SSN is not available and the individual is fully responsible
for all services received, the agency will need to contact central office in order to have
the program closed with a completion status.

#### 12 SATOP Cost and Fees

The costs for the screening, education, and treatment programs are established by the DBH and reviewed periodically. Costs shall not be greater than relative costs indicate. Programs shall not establish costs or fees that are not specified in this rule unless prior authorization from the department is granted. All fees are to be paid by the individual being served.

- (A) The screening fee includes monitoring the individual's progress in the assigned education or treatment program and case coordination with the department, courts, probation and parole, Department of Revenue, and other entities as necessary.
- (B) The cost for treatment in a department-certified and contracted substance use disorder treatment program is based on actual services provided.
- (C) All individuals referred to a SATOP, including those participating in a comparable program as outlined in this rule, are required to pay a supplemental fee as specified in 9 CSR 30-3.208. The supplemental fee is in addition to the cost of the screening, education, and treatment services.

Costs for individuals participating in a WIP, CIP, SROP, or a department-certified and contracted substance use disorder treatment program may be partially offset in accordance with 9 CSR 10-31.011.

#### 12.1 SATOP PROGRAM FEES

Program fees are subject to change. Financial assistance may be available for individuals enrolled in the WIP, CIP and SROP or other state-contracted treatment program.

- Offender Education Program (OEP Level 1) \$200.00
- Adolescent Diversion Education Program (ADEP Level 1) \$200.00
- Weekend Intervention Program (WIP Level II) \$474.76
- (Plus \$6.70 materials fee)
- Clinical Intervention Program (CIP Level III) \$1083.43
- Serious and Repeat Offender Program (SROP Level IV) \$1500.00-\$3000,00 (Additional cost may apply based on clinical need)
- Traditional Treatment (Level IV) variable upon actual services rendered

#### 12.2 SUPPLEMENTAL FEES

All individuals required to complete a SATOP must pay a \$249 supplemental fee. This fee, which is collected and remitted monthly, less a 2 percent administrative fee, must be sent to DMH to be deposited into the Mental Health Earnings Fund (MHEF). Money deposited into the MHEF is used to offset the cost of education and treatment services for individuals required to complete SATOP based on the SMT.

Agencies must post the SATOP Participant Notice Poster, which explains the statutory requirement for the supplemental fees, in the waiting/reception area or other location that is readily accessible to individuals seeking services. If your agency needs the poster(s), please contact DMH/DBH at (573) 526-4020.

The SATOP Supplemental Fee Remittance – Summary and Tally Page must be generated through CIMOR and mailed with a check, payable to the Department of Mental Health, at:

Mental Health Earnings Fund Controller's Office Department of Mental Health PO Box 596 Jefferson City, MO 65102-0596

The check must only include the amount of the supplemental fees due. Do not include any other departmental fees or correspondence with this payment.

The payment must contain:

- Summary Page;
- Tally Page(s); and
- Check.

Your envelope must be postmarked no later than the 15<sup>th</sup> of the following month for all individuals screened during the prior month. If an agency allows an individual to have a payment plan, it is the responsibility of the agency to list the individual on the Tally Page and remit the supplemental fee for the month of the assessment screening.

If an agency does not conduct any assessment screenings for a particular month and has no fees to remit, a SATOP Report of No Activity form must be mailed in accordance with the timelines specified above.

In the event an individual pays the supplemental fee and their name does not appear on the supplemental fee list for the month in which the fee was paid, a SATOP Supplemental Fee Adjustment form must be completed and included with the SATOP Supplemental Fee Remittance – Summary form for that month.

Failure to properly submit supplemental fees may result in sanctions, including revocation of department certification.

- (A) All Substance Awareness Traffic Offender Programs shall collect a supplemental fee from each individual admitted to the program in accordance with section 302.540, RSMo. The supplemental fee is determined by the department and is in addition to any other costs associated with the program.
- (B) The supplement fee is collected one (1) time per offense, regardless of the level of service the individual receives.

- (2) Remittance of Supplemental Fees. On or before the fifteenth day of each month, program administrators shall remit the total of all supplemental fees collected during the prior calendar month, less two percent (2%) which, by law, may be retained by the program to offset collection and remittance costs.
  - (A) Remittance shall be mailed to: Mental Health Earnings Fund, Controller's Office, Department of Mental Health, 1706 East Elm Street, PO Box 596, Jefferson City, MO 65102.
  - (B) Transfer of supplemental fees from the program to the Mental Health Earnings Fund shall be in the form of a single check made payable to the Mental Health Earnings Fund. The payment shall include the SATOP Supplemental Fee Remittance Summary and Agency Tally Sheet.
  - (C) Failure to remit supplemental fees to the department on a timely basis will be considered cause for revocation of program certification.
  - 1. If supplemental fees, including interest and penalties, are not remitted to the department within six (6) months of the due date, the Attorney General of the state of Missouri shall initiate appropriate action for collection of the fees.
- (3) Documentation of Supplemental Fee Transactions. Each program shall maintain, at its principal administrative center, a single record of all supplemental fee transactions, which is separate from all other program records. This separate record will facilitate audits conducted by the department or the State Auditor's Office. A separate program record of supplemental fee transactions shall include copies of monthly remittance forms, copies of checks forwarded to the Mental Health Earnings Fund, and receipts issued by the department.
- (4) Acceptance of Supplemental Fees. The department will only accept supplemental fee remittances from certified SATOPs. If an agency's certification is revoked, the department will accept the supplemental fees owed prior to the date of revocation. The agency shall issue a refund to any individuals from whom a supplemental fee was collected after the date of revocation.
- (5) Notice of Supplemental Fee. Programs shall post, in places readily accessible to persons served, one (1) or more copies of a Student Notice Poster, which shall be provided by the department at no cost to the program. Posters shall explain the statutory requirement for the supplemental fees, disposition of supplemental fees, and the means by which programs collect and remit supplemental fees.

Compliance. Failure to adhere to the stipulations, conditions, and requirements set forth in this rule shall be considered cause for revocation of program certification.

#### 12.3 STANDARDS MEANS TEST

The Standard Meant Test (SMT) is a method by which individuals who qualify may receive financial assistance toward their out-of-pocket expense for education and/or treatment based on income and the ability to pay. Individuals must complete and sign the SMT Financial Questionnaire and Notice of Cost and may be required to provide annual income and number of dependents. Missouri residents are eligible for assistance through the SMT (if able to prove Missouri residency) regardless of the state in which the offense occurred.

Individuals who are required to complete the Offender Education Program (OEP) are required to pay the program cost of \$200. For individuals assigned to complete a higher level program,

the SMT may be applied to offset the cost of the program. Based on the results of the SMT, the cost for the program may be between \$250 and full cost.

Out-of-state residents attending college in Missouri do not meet criteria as a Missouri resident, therefore are not eligible for SMT.

#### 12.4 NOTIFICATION OF SMT

Information regarding the SMT must be provided by the Offender Management Unit (OMU) to each individual who has been referred to a program level higher than level 1, the Offender Education Program (OEP) or Adolescent Diversion Education Program (ADEP). Individuals who request financial assistance must provide the necessary information to the service provider. For individuals who receive Medicaid, Temporary Assistance for Needy Families (TANF), SSI/SSDI, and/or the Supplemental Nutrition Assistance Program (SNAP), a SMT Financial Questionnaire must still be completed, but they do not have to complete all sections of the SMT or verify instate residence or dependents. Individuals must document the type of assistance they receive.

#### 12.5 DOCUMENTATION OF INCOME

Each individual requesting financial assistance must certify their income to the provider (OMU). If the provider believes the income or other information provided to them may be inaccurate, the provider shall request the required documentation.

#### 12.6 MISSOURI RESIDENCY

If there is a reason to question Missouri residency, the provider can request a utility, telephone, cable bill, etc. in the individual's name or copies of income tax returns to verify residency. If an individual is on probation or parole, a letter from the probation and parole officer is sufficient.

#### 12.7 QUESTIONS ABOUT SMT

Questions about the SMT should be directed to the Department of Mental Health Reimbursements Section by calling 573-751-8156 or faxed to 573-526-4560.

#### 13 SATOP FORMS

The DMH utilizes CIMOR to monitor, coordinate, and manage the services provided. Customer Information Management, Outcomes, and Reporting (CIMOR) is a web-based application from which SATOP Assignment and Completion Forms are created, accessed, and generated and serves as a means for submitting billing. CIMOR allows for the electronic submission of forms to various entities, including DOR.

#### 3.1 SATOP OFFENDER ASSIGNMENT FORM

This form identifies the program level in which an individual is placed based on the assessment screening protocol. A copy of the form must be provided to each individual, and where applicable, to the parent or guardian upon completion of the screening. The individual shall

present the Offender Assignment Form to the SATOP agency that will provide the recommended level of service. The agency is required to verify the SATOP Assignment Form in CIMOR.

#### 13.2 SATOP COMPLETION FORM

When an individual successfully completes the assigned level of a SATOP, the agency providing the program (level of service) must notify the OMU (agency that completed the screening) of a successful completion. The OMU must then complete the process by generating a Completion Certificate within seven (7) calendar days of program completion.

If the individual completes a SATOP comparable program, they can present the SATOP Comparable Program Completion form to an OMU or mail it to the Missouri Department of Mental Health (DMH/DBH) in Jefferson City to be processed. The agency processing the comparable must obtain a recent driving report on the individual within two (2) weeks prior to processing the comparable to ensure there has not been any new impaired driving offenses.

If the SATOP Comparable Program Completion Form is approved, the agency providing this service must generate the Completion Certificate. The OMU or DMH/DBH will collect the mandatory \$249 supplemental fee depending on which agency processes the comparable documentation. The OMU may charge a \$46 administrative fee for processing of the SATOP Comparable Program Completion Form.

All out of state and Department of Corrections SATOP Comparable Program Completion Forms must be processed by DMH/DBH in Jefferson City. The SATOP Comparable Program Completion Form and payment of the supplemental fee is required. The fee can be paid online at: <a href="Substance Awareness Traffic Offender Program">Substance Awareness Traffic Offender Program</a> (SATOP) | dmh.mo.gov or in the form of a signed money order made payable to the Mental Health Earnings Fund and mailed to::

#### **Missouri Department of Mental Health**

Controller's Office SATOP PO Box 596 Jefferson City, MO 65102

#### **USEFUL WEBSITES**

Missouri Department of Revenue - Missouri Department of Revenue (mo.gov)

Missouri Department of Transportation - <u>Home Page | Missouri Department of Transportation (modot.org)</u>

Missouri Credentialing Board - <u>Missouri Credentialing Board - Credentialing and Training Substance Use Disorder Professionals for over 40 years. (missouricb.com)</u>

#### **APPENDIX A - SATOP ACRONYMS**

A Form	SATOP Notice of Offender Assignment
	Adolescent Diversion Education Program
ADA	Americans with Disabilities Act
	SATOP Completion Certificate
CARF International Com	mission on Accreditation of Rehabilitation Facilities
CFR	Code of Federal Regulations
CIMORCustomer In	formation Management, Outcomes, and Reporting
CIP	Clinical Intervention Program
	Substance Treatment and Rehabilitation Program
	Division of Behavioral Health
	Deaf and Hard of Hearing
DOC	Department of Corrections
	Department of Revenue
	Department of Mental Health
	Driver Risk Inventory-2
	Health Insurance Portability and Accountability Act
	The Joint Commission
	Medication Assisted Treatment
	Minor in Possession
	Missouri State Highway Patrol
	Offender Education Program
OHS	Office of Highway Safety
	Office of Information Systems
	Offender Management Unit
	Office of State Courts Administrators
	Probation and Parole
	Protected Health Information
	Purchase of Service
	Qualified Addiction Professional
	Qualified Instructor
	Serious and Repeat Offender Program
	Standard Means Test
	SATOP Qualified Professional
WIP	Weekend Intervention Program

#### **APPENDIX B - CONTACTS**

#### **Standard Means Test (SMT)**

 Department of Mental Health Reimbursements Section 573-751-8156 or Faxed to 573-526-456

#### **Complaints and Grievances**

Office of Constituent Services
 Department of Mental Health
 P.O. Box 687
 Jefferson City, Mo 65102

Email: constituentsvcs@dmh.mo.gov

Toll-free: **1-800-364-9687** Local: **573-751-8088** 

#### **Services for Deaf and Hard of Hearing**

David Kingsbury, MA
 Director, Office of Deaf Services

Email: David Kingsbury@dmh.mo.gov

(573) 526-1857 (Voice) (573) 298-6764 (TTY) videophone

https://dmh.mo.gov/deaf-services

## APPENDIX C – OMU ASSESSMENT SCREENING REFERRAL CRITERIA FOR PROGRAM ASSIGNMENT

OMU Assessment Screening Referral Criteria For Program Assignment				
Level I	OEP	<ul> <li>Appropriate for low-risk and low-need adult offenders</li> <li>Qualifying criteria shall include: <ul> <li>individual is 18 years old or older</li> <li>individual's presence in the United States is lawful</li> <li>individual's substance use history is not indicative of a maladaptive pattern of use that has led to clinically significant impairment or distress</li> <li>individual has no prior treatment for a substance use disorder</li> <li>individual has never met the criteria for a substance use disorder.</li> <li>individual is not a Prior or Persistent Offender as defined in section 577.023 RSMo</li> <li>individual has not previously attended this level or a higher SATOP level</li> <li>individual's BAC is less than .180 of one percent by weight while operating a motor vehicle (if applicable)</li> </ul> </li> </ul>		
	ADEP	<ul> <li>Appropriate for low-risk offenders under age 21</li> <li>Qualifying criteria shall include: <ul> <li>individual's substance use history is not indicative of a maladaptive pattern of use that has led to clinically significant impairment or distress</li> <li>individual has no prior treatment for a substance use disorder</li> <li>individual has never met the criteria for a substance use disorder</li> <li>individual is not a Prior or Persistent Offender as defined in section 577.023 RSMo</li> <li>individual has not previously attended this level</li> <li>individual's BAC is less than .180 of one percent by weight while operating a motor vehicle <ul> <li>(if applicable)</li> </ul> </li> </ul> </li> </ul>		

		Appropriate for high-risk adults with a pattern of substance use of mild to
		moderate severity
		Qualifying criteria shall include:
		minimum of age 18
		individual's presence in the United States is lawful
		individual's presence in the officed States is lawful     individual is a resident of the state of Missouri
		individual is a resident of the state of Missouri     individual has less than three DWI's
=	WIP	
<u>e</u>		<ul> <li>individual's substance use history is not indicative of a maladaptive pattern of use that has</li> </ul>
Level II		lead to clinically significant impairment or distress
Ľ		<ul> <li>individual has no prior treatment for a substance use disorder</li> </ul>
		<ul> <li>individual has never met the criteria for a substance use disorder</li> </ul>
		<ul> <li>individual has not previously attended this level or a higher level</li> </ul>
		, ,
		<ul> <li>individual's BAC is less than .220 of one percent by weight while operating a motor vehicle</li> </ul>
		(if applicable)
		<ul> <li>individual has not had (2) impaired driving offenses within (2) years</li> </ul>
		Appropriate for high-risk adult offenders with a substance use disorder
		moderate severity
=		Qualifying criteria shall include:
		minimum of age 18
×	CIP	individual's presence in the United States is lawful
Level III		individual is a resident of the state of Missouri
		individual has less than four DWI's
		individual has not previously attended this level
		Appropriate for high-risk and high-need adults meeting criteria for a substance
		use disorder
		with moderate to severe severity and increased potential for recidivism
		Qualifying criteria shall include:
		individual is 18 years old or older
	SROP	individual's presence in the United States is lawful
		individual is a resident of the state of Missouri
≥		<ul> <li>individual has a BAC content of .150 of one percent or more by weight</li> </ul>
		while operating a
\ \ \		motor vehicle or is a Prior or Persistent Offender as defined in section
Level		577.023 RSMo
		Appropriate for high-risk and high-need adolescents meeting criteria for a
	Level IV	substance use disorder with moderate to severe severity scale. Referral to
		a certified or recognized
		Accredited adolescent substance abuse treatment program.
	'	Appropriate for high-risk and high-need adult offenders meeting criteria for
		a substance use disorder with a moderate to severe severity scale. Referral
		to a certified or recognized accredited substance abuse treatment program.

#### APPENDIX D – CONSENT FOR RELEASE OF CONFIDENTIAL INFORMATION

#### **Consent for Release of Confidential Information**

l,	, [Insert Name of Client], whose Date of Birth
is, authorize [Name of Agency Mental Health and the Missouri Department of R	
The results of my SATOP screening, program	n participation, and completion information.
<ul> <li>Additionally, I authorize the Missouri Department the following information for each of its contraproviders:</li> </ul>	nent of Mental Health to disclose to the Agency acted substance use treatment service
(Initial each item	to be disclosed)
<u>Purpose</u>	
The purpose of the above disclosure is to provinted in the proving the state of the proving privileges.	<b>5</b> ,
Revocation I understand that I have a right to revoke this a written notification to [Insert Name] at [Insert Corevocation of the authorization is not effective to the authorization.	ontact Information]. I further understand that a
Expiration Unless sooner revoked, this authorization expire as otherwise indicated:	es on the following date: or

#### **Conditions**

I understand that my records are protected under the Federal regulations governing Confidentiality of Alcohol and Drug Abuse Patient Records, 42 CFR Part 2, and cannot be disclosed without my written consent unless otherwise provided for in the regulation. However, I further understand that failure to sign this Consent for Release of Confidential Information may have the following consequences:

Non-completion of the Substance Abuse Traffic Offender Program (SATOP)

Form of	Disc	losure
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Unless you have specifically requested in writing that the disclosure be made in a certain format, we reserve the right to disclose information as permitted by this authorization in any manner that we deem to be appropriate and consistent with applicable law, including, but not limited to, verbally, in paper format, or electronically.

I will be given a copy of this authorization for my record	ds.	
Signature of Individual	Date	

### APPENDIX E - WIP NOTICE TO PARTICIPANTS

Created:

### WEEKEND INTERVENTION PROGRAM Notice to Participants

Dear:	
is	certified by the State of Missouri to provide the
Weekend Intervention Program (WIP). Comլ	oletion of the program will contribute to meeting the
Substance Awareness Traffic Offender	Program's requirements for driver's license
reinstatement.	
The next WIP will be held at (address):	on the
following (dates and time):	If you are planning on attending,
plan to arrive no later thanP.I	M. on Friday. The program fee is \$,
which must be paid before you can register.	
•	ree eath or urine testing when alcohol or other drug therwise be verified during the course of the WIP. rms e, appropriate manner on until dismissal
If you have any questions about the program	n, please contact
at (phone	):

#### APPENDIX F - WIP INDIVIDUAL COUNSELING SESSION

Created:

## **Weekend Intervention Program Individual Counseling Session**

1:1 Session Note Include date, length of service, and counselor signature
Individual's self-assessment:
Individual 5 Self-assessment.
Regarding counselor's recommendations:
□ Individual agrees and will follow
□ Client agrees, but will not follow □ Client disagrees

## APPENDIX G – WIP CERTIFICATE OF COMPLETION AND NOTICE OF RECOMMENDATIONS

Created:

## WEEKEND INTERVENTION PROGRAM Certificate of Completion and Notice of Recommendations

Γhis is to certify that				
has successfully met all requirements for completion of the Weekend intervention Program.  The program staff has made the following recommendations for additional services:				
				□ Abstain from the use of alcohol (other drugs)
□ Enroll in outpatient substance use treatment (individual or group)				
□ Enroll in outpatient counseling for: stress management, relationship problems, work problems, further assessment, etc.				
□ Attend Self Help meetings# of times per week. (AA, NA, AL anon)				
□ Other:				
Counselor's Signature Date				
I have been informed of the recommendation(s) and have received a list of area resources. I understand that I can successfully complete the Weekend Intervention Program without receiving further services, although a legal judgement in a court of law may stipulate such services. I understand that the Weekend Intervention Program does not require me to utilize any particular service provider. My signature below indicates that I have been informed of the above recommendations and that I have received a list of area resources.				
Participant's Signature:				
Date:				